



## Economic Impact Analysis Virginia Department of Planning and Budget

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**18 VAC 85-130 – Regulations Governing the Practice of Licensed Midwives**  
**Department of Health Professions**  
April 7, 2006

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### Summary of the Proposed Amendments to Regulation

Pursuant to Chapters 719 and 917 of the 2005 Acts of the General Assembly, the Board of Medicine (board) proposes to introduce licensure regulations for the midwife profession.

### Result of Analysis

The benefits likely exceed the costs for all proposed changes.

### Estimated Economic Impact

Section § 54.1-2957.7 of the Code of Virginia defines *midwife* as “any person who provides primary maternity care by affirmative act or conduct prior to, during, and subsequent to childbirth, and who is not licensed as a doctor of medicine or osteopathy or certified nurse midwife.” For nearly two years midwifery was illegal in Virginia. Chapter 641 of the 2003 Acts of the Assembly ‘repealed Article 4 of Chapter 5 of Title 32.1 (§[32.1-145](#) et seq.) and amended §[54.1-2901](#) of the Code of Virginia to eliminate the registration and allowance of the practice of non-nurse midwifery.’<sup>1</sup> The repeal was effective December 31, 2003. Chapters 719 and 917 of the 2005 Acts of the General Assembly reintroduced the profession of midwifery to Virginia law. Pursuant to these chapters, emergency regulations permitting the licensure and practice of midwifery became effective on December 21, 2005. Thus, midwifery was illegal from December 31, 2003 to December 20, 2005.

Pursuant to Chapters 719 and 917 of the 2005 Acts of the General Assembly, the board proposes these permanent licensure regulations for the midwife profession. In order to become

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<sup>1</sup> Source: Virginia General Assembly Legislative Information System Editor’s Note to Administrative Code 12VAC5-400-10 to 12VAC5-400-90. [Repealed]

licensed, midwives must: a) pay a \$277 application fee, b) hold a current Certified Professional Midwife (CPM) credential issued by the North American Registry of Midwives (NARM), and c) submit a report from NARM indicating whether there has ever been any adverse action taken against the applicant. A candidate can obtain the CPM credential through any one of four alternative routes: 1) graduation from a Midwifery Education Accreditation Council accredited program, 2) certification by the American College of Nurse-Midwives Certification Council as a Certified Nurse Midwife or a Certified Midwife), 3) legal recognition in states/countries previously evaluated for educational equivalency, or 4) completion of NARM's portfolio evaluation process. Each route to the CPM credential has further requirements which are described in the NARM document called "How to Become a Certified Professional Midwife (CPM)."<sup>2</sup> All routes include a written test, clinical experience and a minimum of \$700 in fees.<sup>3</sup>

The American Public Health Association recommends that access to out of hospital maternity care services with direct entry midwives be increased.<sup>4</sup> Research studies such as Johnson and Daviss' (2005) "Outcomes of planned home births with certified professional midwives: large prospective study in North America" have found that planned home births supervised by midwives for women with low risk pregnancies are associated with similar safety to low risk hospital births.<sup>5</sup> Additionally, the costs for home births tend to be much lower than hospital births.<sup>6</sup> Consequently, permitting well-trained and certified midwives to legally provide maternity care for women with low risk pregnancies will likely produce net benefits for the Commonwealth.

## **Businesses and Entities Affected**

Midwives and their clients are affected by the proposed regulations. According to the Department of Health Professions, 7 midwives have thus far become licensed since the emergency regulations became effective. Hospitals will likely be very slightly affected by having a small reduction in potential births.

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<sup>2</sup> "How to Become a Certified Professional Midwife (CPM)" appeared on the North American Registry of Midwives website (<http://www.narm.org/>) on the date of this report's publication, April 7, 2006.

<sup>3</sup> All details concerning CPM requirements were obtained from "How to Become a Certified Professional Midwife (CPM)." This document appeared on the North American Registry of Midwives website (<http://www.narm.org/>) on the date of this report's publication, April 7, 2006.

<sup>4</sup> Source: American Public Health Association (2002)

<sup>5</sup> Sources: Johnson and Daviss (2005)

## Localities Particularly Affected

The proposed regulations affect all Virginia localities. There may be disproportionate demand for midwives in rural areas where hospitals can be relatively distant.

## Projected Impact on Employment

The proposed regulations will likely increase the number of active midwives in the Commonwealth.

## Effects on the Use and Value of Private Property

The proposed regulations will likely increase the number of active midwife practices in the Commonwealth.

## Small Businesses: Costs and Other Effects

The proposed regulations, in concert with the 2005 legislation, permit midwife practices to legally operate. This is clearly positive for these small businesses.

## Small Businesses: Alternative Method that Minimizes Adverse Impact

The proposed regulations, in concert with the 2005 legislation, permit midwife practices to legally operate. This is clearly positive for these small businesses.

## References

American Public Health Association, “2001-3: increasing access to out-of-hospital maternity care services through state-regulated and nationally-certified direct-entry midwives,” *American Journal of Public Health* 2002;92: 453-5.

Anderson RE, Anderson DA, “The cost-effectiveness of home birth,” *Journal of Nurse-Midwifery* 1999;44: 30-5.

Johnson KC, Daviss BA, “Outcomes of planned home births with certified professional midwives: large prospective study in North America,” *British Medical Journal* 2005;330: 1416.

North American Registry of Midwives, “How to Become a Certified Professional Midwife (CPM),” (<http://www.narm.org/>) June 2005.

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<sup>6</sup> Sources: Anderson and Anderson (1999) and Johnson and Daviss (2005)

## Legal Mandate

The Department of Planning and Budget (DPB) has analyzed the economic impact of this proposed regulation in accordance with Section 2.2-4007.H of the Administrative Process Act and Executive Order Number 21 (02). Section 2.2-4007.H requires that such economic impact analyses include, but need not be limited to, the projected number of businesses or other entities to whom the regulation would apply, the identity of any localities and types of businesses or other entities particularly affected, the projected number of persons and employment positions to be affected, the projected costs to affected businesses or entities to implement or comply with the regulation, and the impact on the use and value of private property. Further, if the proposed regulation has adverse effect on small businesses, Section 2.2-4007.H requires that such economic impact analyses include (i) an identification and estimate of the number of small businesses subject to the regulation; (ii) the projected reporting, recordkeeping, and other administrative costs required for small businesses to comply with the regulation, including the type of professional skills necessary for preparing required reports and other documents; (iii) a statement of the probable effect of the regulation on affected small businesses; and (iv) a description of any less intrusive or less costly alternative methods of achieving the purpose of the regulation. The analysis presented above represents DPB's best estimate of these economic impacts.